

California Department of Health Services  
Licensing & Certification Program

Health Facility License Fees  
ANNUAL REPORT  
FY 2007-08

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## **LEGISLATIVE REQUIREMENTS**

The California Health and Safety Code (H&S) Section 1266(d) requires the California Department of Health Services (CDHS), Licensing and Certification Program (L&C) by February 1 of each year to:

- Publish the list of estimated fees on the program's internet website
- Submit a report of all costs for activities of the L&C program
- Provide a system and staffing analysis

## **BACKGROUND**

Health and Safety (H&S) Code Sections 1254, 1282 and 1417 require the L&C program in CDHS to license health facilities doing business in California. CDHS's contract with the federal Centers for Medicare and Medicaid Services (CMS), as well as provisions of California's Medicaid State Plan, requires L&C to certify facilities for participation in Medicare (Title XVIII) and/or Medi-Cal (Title XIX). In conducting these activities, L&C develops and enforces state licensure standards, conducts inspections to assure compliance with federal standards for facility participation in Medicare and/or Medi-Cal, and responds to complaints against providers licensed by the Department.

The state's 2006-07 budget amended H&S Code 1266 and transformed L&C from an indirect fee-supported program to a special fund program. Prior fee amounts that were set in statute were deleted and the law now requires that all health facility and agency fee amounts shall be set in accordance with H&S Code 1266. Specifically, amended H&S Code 1266:

- Establishes the L&C Program Special Fund;
- Changes the annual fee setting methodology and reporting process;
- Eliminates the fee waiver for health facilities and agencies operated by non-State public agencies; and,
- Establishes late payment penalties for license renewals.

## **ESTIMATED LICENSING FEES**

H&S Code Section 1266 was amended to "right-size" the license fee calculation methodology based on the workload and cost of licensing and regulating health facilities and agencies. The regulated health facility and agency community will have more information on the special fund account revenues and the uses of these funds to support regulatory compliance activities. Further, H&S Code Section 1266.9 established the L&C Program Special Deposit Fund. License fees deposited in the new special fund are to be used in support of the L&C Program activities.

Prior fee amounts that were set in statute were deleted. Current law specifies that all health facilities and agency fee amounts will be set in accordance with Section 1266 and specifies the methodology for annually recalculating license fees for all licensed

health facilities. The fee waiver has been eliminated for health facilities and agencies operated by counties, cities, University of California Regents, and health care districts. Only state departments, authorities, bureaus, commissions or officers are exempt from paying license fees.

## METHODOLOGY

1. Identify workload activities by provider type to include, but not be limited to, federal certification and state licensing initial and periodic surveys; inspections, and complaint investigations;
2. Determine the appropriate number of activities required for each fee category annually;
3. Multiply the corresponding standard average hours per activity type based on historical data for each facility type to determine total annual hours for all fee categories;
4. Divide the annual hours for each fee category by the total annual workload hours to determine the percentage for each fee category;
5. Multiply the appropriate percentage by the total L&C program budget to determine the total cost for each facility category;
6. Subtract the appropriate amount of estimated federal funds to be received in the budget year allocated to each fee category to determine the net Special Fund cost; and,
7. Divide the net Special Fund cost for each fee category by the appropriate denominator, either the number of beds for in-patient health facilities or number of facilities for out-patient facilities, to determine the per-bed or per facility fee.

**Attachment A** reflects the assumptions and calculations used to arrive at the fees summarized below.

License Fees by Facility Type			
Facility Type	Fee Category	Fee 06/07	Fee 07/08
Referral Agencies	per facility	5,537.71	6798.11
Adult Day Health Centers	per facility	4,650.02	4390.30
Home Health Agencies	per facility	2,700.00	5568.93
Community Clinic	per facility	600.00	3524.27
Psychology Clinic	per facility	600.00	3524.27
Rehab. Clinic	per facility	2974.43	3524.27
(Non-Profit)	per facility	500.00	3524.27
Surgical Clinic	per facility	1,500.00	3524.27
Chronic Dialysis Clinic	per facility	1,500.00	3524.27
Pediatric Day Health/Respite Care	per bed	142.43	139.04
Alternative Birthing Centers	per facility	2,437.86	1713.00
Hospice	per facility	1,000.00	2517.39
General Acute Care Hospitals	per bed	134.10	309.68
Acute Psychiatric Hospitals	per bed	134.10	309.68
Special Hospitals	per bed	134.10	309.68
Chemical Dependency Recovery	per bed	123.52	200.62
Congregate Living Health Facility	per bed	202.96	254.25
Skilled Nursing	per bed	202.96	254.25
Intermediate Care Facility (ICF)	per bed	202.96	254.25
ICF - Developmentally Disabled	per bed	592.29	701.99
ICF - Developmentally Disabled - DDH & DDN	per bed	1,000*	701.99
Correctional Treatment Centers	per bed	590.39	807.85

\* Legislatively established fee "per facility"

### Notes:

The workload used to calculate the fees was based on a "zero based" analysis of all federal survey workload and quantifies the number of evaluator positions needed to do 100% of the federal, state and complaint workload.

The total annual hours of work in each facility type creating a percentage of overall workload per facility was calculated as follows:

- The number of surveys required for each facility type annually was multiplied by the corresponding standard average hours to conduct a survey in each facility type.
- The same calculations were done for each activity including citations, complaints, and appeals as appropriate for each facility type. *(Note: The numbers as well as the standard time associated with each activity were based on historical data)*

## **STAFFING AND SYSTEMS ANALYSIS**

H&S Code Section 1266(d)(2) requires L&C to complete a staffing systems analysis to ensure (a) efficient and effective utilization of fees collected; and (b) proper allocation of departmental resources to licensing and certification activities, survey schedules, complaint investigations, enforcement actions and appeals, data collection and dissemination, surveyor training, and policy development.

The following 5 charts depict information from FY 2005-06 which represents the last full FY for which CDHS has data. The data reflects actual work completed with positions filled during that time period. The purpose of displaying this information is to show the efficient and effective utilization of the fees that were collected in FY 2005-06.

# Surveyors and Administrative Support Personnel

Health and Safety Code Section 1266(d)(2)(B)(i)

FY 2005-06

	17 Field Offices L.A. County Contract				Professional Certification Branch		Headquarters		Total	
	Pos	%	Pos	%	Pos	%	Pos	%	Pos	%
Surveyors	297.8	64.11%	94	58.20%	3	4.29%			394.8	48.50%
Managers/Supervisor & Support Staff	137.2	29.54%	62.5	38.70%	67	95.71%			266.7	32.76%
Consultants	29.5	6.35%	5	3.10%					34.5	4.24%
Field Overhead							54.2	45.89%	54.2	6.66%
Division Overhead							63.9	54.11%	63.9	7.85%
<b>Total</b>	464.5	100.00%	161.5	100.00%	70	100.00%	118.1	100.00%	814.1	100.00%
Positions	626.0				70		118.1		814.1	
Percent	76.89%				8.60%		14.51%		100.00%	
	<ul style="list-style-type: none"> <li>• Evaluate and report on services and conditions in facilities</li> <li>• Cite deficiencies and issue penalties</li> <li>• Approve plans of correction</li> <li>• Issue, deny, or revoke licenses</li> <li>• Control performance of other public agencies' survey staff</li> </ul>				<ul style="list-style-type: none"> <li>• Certification of Certified Nurse Assistants (CNAs), Home Health Aides (HHAs) and Certified Hemodialysis Technicians (CHTs)</li> <li>• Health Professions Consultation</li> <li>• Nursing Home Administrator Program</li> <li>• Data Collection and Reporting</li> <li>• Investigations</li> </ul>		<ul style="list-style-type: none"> <li>• Budgeting, Accounting, and Personnel</li> <li>• Training</li> <li>• Time Reporting</li> <li>• Data Collection</li> <li>• Policy Development and Interpretation</li> <li>• Regulations Preparation</li> <li>• Legislative, analysis of proposed legislation</li> <li>• Procurement</li> <li>• Information Technology Support</li> <li>• Communication, Ongoing liaison and advocacy with industry and other public agencies</li> </ul>			

As of 6/30/2006

**The Percentage of Time Devoted to L&C Activities for all Licensed Health Facilities**  
Health and Safety Code Section 1266(d)(2)(B)(ii)

**FY 2005-06**

	<b>HOURS</b>	
<b>FACILITY TYPE</b>	<b>#</b>	<b>%</b>
Referral Agencies	----	0.00%
Adult Day Health Center	3,902	0.77%
Home Health Agency	37,772	7.46%
Community Clinics	704	0.14%
Psychology Clinic	----	0.00%
Rehab Clinic	324	0.06%
Surgical Clinic	1,351	0.27%
Chronic Dialysis Clinic	5,723	1.13%
Pediatric Day Health/Respite Care	----	0.00%
Alternative Birthing Centers	----	0.00%
Hospice	2,600	0.51%
General Acute Care Hospital	39,741	7.85%
Acute Psychiatric Hospital	4,825	0.95%
Special Hospitals	----	0.00%
Chemical Dependency Recovery Hospital	127	0.03%
Congregate Living Health Facilities	194	0.04%
Skilled Nursing Facilities	312,301	61.69%
Intermediate Care Facility	6,315	1.25%
Intermediate Care Facility Developmentally Disabled	20,946	4.14%
Intermediate Care Facility Developmentally Disabled Habilitative	50,046	9.89%
Intermediate Care Facility Developmentally Disabled Nursing	17,740	3.50%
Correction Treatment Center	1,639	0.32%
<b>TOTALS</b>	<b>506,250</b>	<b>100.00%</b>



## Surveys and Follow-up Visits Performed

Health & Safety Code Section 1266(d)(2)(B)(iii)

**FY 2005-06**

	<b>SURVEYS</b>		<b>FOLLOWUP</b>
	Initial	Resurvey	<b>REVISITS</b>
Referral Agencies	0	0	0
Adult Day Health Centers	4	44	0
Home Health Agencies	7	122	126
Community Clinics	13	6	5
Psychology Clinic	0	0	0
Rehabilitation Clinics	1	0	0
Surgical Clinic	10	8	8
Chronic Dialysis Clinics	4	25	20
Pediatric Day Health/Respite Care	0	1	0
Alternative Birthing Center	0	0	0
Hospice	5	4	3
Hospitals	1	14	47
Chemical Dependency Recovery	0	0	0
Congregate Living Health Facility	3	4	0
Skilled Nursing Facility	7	1,241	1,420
Intermediate Care Facility (ICF/non-nursing)	1	4	1
ICF/Developmentally Disabled (ICF/DD); ICF/DD-H; ICF/DD-N	12	772	576
Correctional Treatment Center	6	7	4
<b>Totals</b>	74	2,255	2,210
<b>Category Totals</b>	2,329		2,210
<b>Grand Total</b>	4,539		
<b>Category Percents</b>	51.3%		48.6%

**NOTES:**

INITIAL LICENSING SURVEY: facilities that have applied for licensure

FOLLOW-UP VISITS: return visits to verify corrective actions in facilities where surveys or complaint investigations have recently occurred.

## Number and Timeliness of Complaint Investigations

Health & Safety Code Section 1266(d)(2)(B)(iv)

**FY 2005-06**

### Complaints Received

	# Received	%	I&S	%	Not I&S	%
Long-Term Care	5826	65.38	386	6.63	5440	93.37
Non Long-Term Care	3085	34.62	65	2.11	3020	97.89
<b>Total</b>	8911	100.00	451	5.06	8460	94.94

### Timeliness of Initiating Complaint Investigations

I&S and Not I&S

	# I&S Received	# I&S Late Initiating	%	# Not I&S Received	# Not I&S Late Initiating	%
Long-Term Care	386	16	4.15	5440	3014	55.40
Non Long-Term Care	65	8	12.30	3020	2200	72.84
<b>Total</b>	451	24	5.32	8460	3234	38.22

#### NOTES:

1. "I&S" means immediate and serious.
2. Source of data is from ACTS. Report ran on December 18, 2006
3. An I&S complaint is defined in H&S Code Section 1420 (a) (1) as follows: The complaint involves a threat of imminent danger of death or serious bodily harm and requires Licensing and Certification (L&C) to make an onsite inspection or investigation within 24 hours of the receipt of the complaint.
4. Not I&S complaint is defined in H&S Code Section 1420 (a) (1) as follows: A complaint NOT I&S does not involve a threat of imminent danger of death or serious bodily harm and requires L&C to make an onsite inspection or investigation within 10 working days of the receipt of the complaint.

**Data on Deficiencies and Citations**  
Health & Safety Code Section 1266(d)(2)(B)(v)

**FY 2005-06**

FACILITY TYPE	CITATIONS ISSUED						NO. OF
	AA	A	B	1ST B	WMF	WMO	DEFICIENCIES
Skilled Nursing Facility	8	54	310	0	1	1	595
Intermediate Care Facility (ICF)	1	2	7	0	0	0	18
ICF/Developmentally Disabled (ICF/DD)	0	1	37	0	0	0	47
ICF/DD-Habilitative (ICF/DDH)	2	7	82	0	0	0	110
ICF/DD-Nursing (ICF/DD-N)	3	6	26	0	0	0	50
Congregate Living Health Facility	0	0	1	0	0	0	1
<b>TOTALS</b>	14	70	463	0	1	1	821

**TOTAL NUMBER OF CITATIONS ISSUED - 549**

1. The relationship of deficiencies to citations issued is that a deficiency is a citation without a monetary penalty. A citation results when a survey or complaint investigation identifies a "deficiency" that can seriously affect the health or safety of a patient.
2. "AA" means meet the definition of a Class "A" violation and was a direct proximate cause of patient death.
3. "A" means Immediate danger of death
4. "B" means immediate relationship to patient health, safety, or security can include emotional and financial elements.
5. "WMF" means willful material falsification.
6. "WMO" means willful material omission.
7. Only Long-Term Care Facilities included and excludes complaints and deficiencies issued under federal requirements. The total of federal survey deficiencies to support federal civil money penalty decisions is 23,416.

**Citation Appeals Statewide**

RESOLUTION TYPE	No.	%
Citation Review Conferences	88	55.0%
Administrative Law Judge	33	20.6%
Court Appeals	27	16.9%
Arbitration	12	7.5%
<b>Total</b>	<b>160</b>	<b>100.0%</b>

**Other Applicable Activities**  
Health & Safety Code Section 1266(d)(2)(B)(vi)

**Surveyor Training Provided in FY 2005-06**

<b>Description/Course Name</b>	<b>Training Dates</b>	<b>Total Number Trained</b>
<b>New Surveyor Orientation Academy</b>	09/30/2005	28
	01/20/2006	44
	06/19/2006	26
<b>Dietary Inservice: Renal Disease and Nutrition</b>	08/29/2005	31
	11/14/2005	24
<b>Dietary Inservice: FOSS Findings &amp; Dietary/Nutrition Services</b>	08/29/2005	15
	09/20/2005	19
	10/02/2005	15
	10/31/2005	18
<b>Inservice: FOSS Findings</b>	09/29/2005	16
	10/17/2005	29
<b>Long Term Care Policy Year Review 2005</b>	01/30/2006	18
<b>Pharmacy Inservice: Antipsychotic Meds/New Warnings</b>	02/28/2006	11
<b>QIS State-Federal Training</b>	03/09/2006	5
<b>Pressure Ulcer Protocol</b>	08/02/2005	17
	09/19/2005	29
	09/26/2005	17
<b>GACH Inservice Training 2005</b>	07/18/2005	25
<b>Restraints Revisited Module</b>	07/05/2005	27
	07/20/2005	21
	07/28/2005	34
	08/15/2005	24
	08/26/2005	17
	09/29/2005	12
<b>Team Coordinator Inservice</b>	07/05/2005	17
	07/11/2005	49
	07/25/2005	20
	07/26/2005	31
	08/22/2005	26
	08/23/2005	17
	09/01/2005	68
	10/17/2005	31
	10/27/2005	42
<b>ASE Training</b>	05/09/2006	37
	05/16/2006	20
<b>CMS Video: Medicare Part D: Impact on Nursing Home Surveys</b>	02/27/2006	16
<b>CMS Video: Psychosocial Outcome Severity Guide</b>	06/16/2006	12
	06/26/2006	28
<b>CMS Video: Basic Meds in ICF/MR</b>	12/13/2005	11
<b>CMS Video: Flu &amp; Pneumonia Immunization in Nursing Homes</b>	01/30/2006	12
<b>CMS Video: Fall Prevention</b>	12/13/2005	11

<b>CMS Video: Decisions That Matter</b>	12/13/2005	10
<b>CMS Video: Dementia Part I</b>	12/13/2005	9
<b>CMS Video: Dementia Part II</b>	12/13/2005	6
<b>CMS Video: Life Safety Code 2000 Update</b>	12/13/2005	3
<b>CMS Video: How People With Severe/Profound Disabilities Learn</b>	12/13/2005	14
<b>CMS Video: Hydration</b>	12/13/2005	12
<b>CMS Video: Making Sense of Data</b>	01/30/2006	17
	03/02/2006	19
<b>CMS Video: Medical Aspects of Neglect</b>	01/30/2006	13
	03/27/2006	16
<b>CMS Video: LTC Policy Year 2005 Review</b>	04/24/2006	11

## **Administrative Changes to Support the Change to A Special Funded Program and Comply With the New Fee Methodology**

Timekeeping - A new timekeeping system was implemented in FY 06-07 which enables each surveyor to code their time specifically by provider type, survey type and activity type. As a result, L&C is able to more accurately charge the costs to appropriate funding source.

ELMS - "Electronic Licensing Management System" is the State Health Facility Licensing System. Since its implementation in February 2005, L&C completed the enhancement to expand the web-based health facilities licensing system ELMS to include the centralized fee collection functions.

During Fiscal Year 2005-06, L&C was directed to right-size the licensing fees on all health facility types in order to become a fee supported special fund program as of FY 2006-07. The ELMS enhancement was initiated in March 2006 and completed in June 2006, this system enhancement extended ELMS' functions to provide L&C's newly established Fee Development & Revenue Collection Unit with the following capabilities to:

1. Centralize the initiation and distribution of license renewal notices.
2. Centralize the collection of license fees.
3. Monitor daily automatic upload of the account receivable information and payment information to the Department's accounting system, CalSTARS.
4. Calculate late payment fees when the facility fails to submit the license payment on-time.
5. Manage reports such as: Outstanding Renewal Notice Receivables; Account Receivables Aging Report; and Daily Payment Report.

With the completion of the centralized fee collection enhancement, L&C redesigned its MS Excel-based timekeeping system in FY 2006-07. The improved timekeeping system provides L&C with detail information on the amount of time surveyors spend in conducting the licensing and certification activities as specified by facility type.

FY 07/08 Licensing and Certification  
Health Facility License Fees

Attachment A

Activity	2006-2007				06/07 Fees	07/08 Base Special Fund Costs	177,000	195,000	592,000	2,491,000	7,169,000	355,000	20,000	19,000	431,000	11,449,000	4,195,000	318,000	49,000	3,051,000	619,000	-344,000	1,068,000	2007-2008				07/08 Proposed Fees		
	NON-STATE		STATE OPERATED				LC-05	LC-06	LC-07	LC-08	LC-09	LG-01	MC-04	MC-10	PS-02	Total 07/08 BCP Costs	ProRata	Retirement Adjustment	Statewide Surcharge	Employee Comp.	Price Increase	One Time Adjust.	Total 07/08 Budget Adj. Costs	Total 07/08 Special Fund Budget	07/08 Special Fund Loan Repayment	NON-STATE			STATE OPERATED	
	Facilities	Beds	Facilities	Beds																						Facilities	Beds		Facilities	Beds
Referral Agencies	11				5,537.71	53,057	145					290		16	352	803	3,430	260	40	2,495	506	-281	6,450	60,310	873	9			6798.11	
Adult Day Health Centers	355				4,650.02	1,343,936	3,666					7,353		394	8,927	20,340	86,888	6,587	1,015	63,193	12,821	-7,125	163,379	1,527,655	22,121	353			4390.30	
Home Health Agencies	1167				2,700.00	5,230,102	14,267					28,615		1,531	34,741	79,154	338,136	25,632	3,950	245,924	49,894	-27,728	635,808	5,945,064	86,086	1,083			5568.93	
Community Clinic	1091				600.00	6,430,203	17,541					35,181		1,883	42,712	97,317	415,725	31,514	4,856	302,354	61,343	-34,090	781,702	7,309,222	105,839	1,099			3524.27	
Psychology Clinic	22				600.00																					22			3524.27	
Rehab. Clinic	72				2,974.43																					73			3524.27	
(Non Profit)	8				500.00																					8			3524.27	
Surgical Clinic	742				1,500.00																					477			3524.27	
Chronic Dialysis Clinic	418		3		1,500.00																					422		3	3524.27	
Pediatric Day Health/Respite Care		245			142.43	26,175	71			2,491		143		8	174	2,887	1,692	128	20	1,231	250	-139	3,182	32,244	431		235		139.04	
Alternative Birthing Centers	5				2,437.86	7,428	20					41		2	49	112	480	36	6	349	71	-39	903	8,443	122	5			1713.00	
Hospice	246				1,000.00	606,885	1,655					3,320		178	4,031	9,184	39,236	2,974	458	28,536	5,790	-3,217	73,777	689,846	9,989	277		1	2517.39	
General Acute Care Hospitals		72430		2252	134.10	16,232,354	44,281	195,000			7,169,000	88,810		4,753	107,823	7,609,667	1,049,452	79,553	12,257	763,261	154,853	-86,059	1,973,317	25,815,338	267,178		75,279		385	309.68
Acute Psychiatric Hospitals		8917			134.10																						6,472		2,064	309.68
Special Hospitals		24			134.10																						24			309.68
Chemical Dependency Recovery		613			123.52																					106,645	291			
Congregate Living Health Facility		391			202.96	27,556,483	75,170		542,439	1,815,939		150,765		8,069	183,042	2,775,424	1,781,578	135,052	20,810	1,295,731	262,884	-146,094	3,349,961	33,681,868	453,570		359			254.25
Skilled Nursing		152098		2356	202.96																						125,048		2,580	254.25
Intermediate Care Facility (ICF)		4731		4295	202.96																						904		5,370	254.25
ICF - Developmentally Disabled		5353		4150	592.29																						1,037		4,150	701.99
ICF-DDH		4982			1,000	6,824,061	18,615		49,561	672,570		37,335	20,000	1,998	45,328	845,407	441,188	33,444	5,153	320,874	65,100	-36,178	829,581	8,499,049	112,322		7,080		701.99	
ICF -DDN		2117			1,000							2,564			137	3,113	7,092	30,300	2,297	354	22,037	4,471	-2,485	56,974	532,737	7,714		196		807.85
Correctional Treatment Centers		637		340		468,671	1,278					2,564			137	3,113	7,092	30,300	2,297	354	22,037	4,471	-2,485	56,974	532,737	7,714		196		807.85
							64,886,000	177,000	195,000	592,000	2,491,000	7,169,000	355,000	20,000	19,000	431,000	11,449,000	4,195,000	318,000	49,000	3,051,000	619,000	-344,000	7,888,000	84,223,000	1,068,000				

Note:  
64,886,000  
\*ICF DDH/DDN subsidized fee is per facility but full right-sized fee is per bed (avg. # of beds per facility is 6.2)

Total 07/08 Budget Adj Costs include: \$4,195,000 Pro Rata, \$318,000 Retirement Adj, \$49,000 Statewide Surcharge, \$3,051,000 Employee Comp, \$619,000 Price Increase, and a one time adj of \$-344,000.

BCP's:  
LC-05 Increased Administrative Support for the L&C Program  
LC-06 Implementation of AB 774, Hospital Fair Pricing Policies  
LC-07 AB 2373, Automated Drug Delivery System  
LC-08 SB 1312, Health Facilities and Periodic State and Federal Inspections; Penalties  
LC-09 SB 1301, Health Facilities: Reporting and Inspection Requirements  
LG-01 Legal Support for Increased Licensing and Certification Enforcement  
MC-04 Intermediate Care Facility/Developmentally Disabled-Continous Nursing Pilot Project  
MC-10 HIPPA Renewal and Maintenance  
PS-02 Healthcare Associated Infections Program

Assumptions:  
1. 07/08 costs determined by adding 07/08 BCP's and budget adjustments to the 06/07 Budget Adj  
2. 07/08 total revenue needed by adding the GF loan repayment to the 07/08 proposed budget  
3. fee determined by dividing total revenue by facility/ bed number by activity  
4. GF cost determined by # of state-operated facilities fee  
5. Fees calculated by grouping costs for like facilities and dividing total by total No. of beds  
6. LC-07 was spread based on percentage of total beds for each LTC facilities (CLHF, SNF, ICF, ICF-DD, ICF-DDH, ICF-DDN)